

Attorney(s)

Index # 1:19-cv-00639

Purchased/Filed: January 24, 2019

STATE OF NEW YORK

Court: U. S. District

County/District: Southern Dist.

AFFIDAVIT OF SERVICE

M.G., P.C., C.J., M.J., J.R., and D.R. Individually and on behalf of all similarly situated

Plaintiff(s)/Petitioner(s)

vs
Ann Marie T. Sullivan, in her official capacity as the Commissioner of the New York State Office of Mental Health, et al

Defendant(s)/Respondent(s)

STATE OF NEW YORK COUNTY OF ALBANY

Christopher Warner, being duly sworn deposes and says deponent is not a party herein, is over the age of eighteen years and resides in the State of New York. That on January 28, 2019 at 3:02 pm at W.A. Harriman State Campus, Bldg. 9, Albany, NY (Address where service was accomplished.) deponent did serve the following :

Summons In a Civil Action, Complaint

on: Anne Marie McGrath, Assoc. Commissioner NYS Dept. of Corrections and Community Supervision

Respondent (herein called recipient) therein named. , SS.:

#1 INDIVIDUAL By delivering a true copy of each to said recipient personally; deponent knew the person served to be the person described as said person therein.

#2 CORP. A corporation, by delivering thereat a true copy of each to Mark Richter personally, deponent knew said corporation so served to be the corporation, described in same as said recipient and knew said individual to be Authorized Agent / Assistant Counsel thereof.

Service was made in the following manner after your deponent was unable, with due diligence, to serve the defendant in person, including an effort to reach the defendant by telephone, (if such telephone number was available) and an attempt to locate the defendant's place of employment.

#3 SUITABLE

AGE PERSON By delivering a true copy of each to a person of suitable age and discretion who agreed to accept on behalf of the party.. Said premises is recipient's: [] actual place of business [] dwelling house (usual place of abode).

#4 AFFIXING TO DOOR

By affixing a true copy of each to the door of said premises, which is recipient's [] actual place of business [] dwelling house (usual place of abode) within the state.

#5 MAILING COPY

On _____ deponent completed service under the last two sections by depositing a copy of the above listed documents to the above address in a First Class postpaid properly addressed plain envelope marked "Personal and Confidential" in an official depository under the exclusive care and custody of the United States Post Office in the State of New York.

The outside of the envelope did not include a return address or indicate that the communication was from an attorney.
Deponent called at the aforementioned address on the following dates and times:

on the _____ day of _____ at _____
on the _____ day of _____ at _____

#6 DESCRIPTION

A description of the person served is as follows:

(use with #1, 2 or 3) Sex Male Color of skin White Hair Brown Approx.Age 51 - 65 Yrs. Approx.Height Over 6'

Approx. weight Over 200 Lbs. Other _____

#7 WIT. FEES

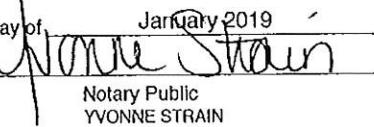
\$ _____ the authorizing traveling expenses and one day's witness fee was paid (tendered) to the recipient.

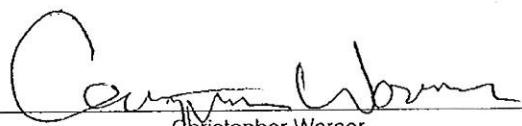
#8 NON MIL

To the best of my knowledge and belief, said person was not presently in military service of the United States Government or on active duty in the military service in the State of New York at the time of service.

Sworn to before me on this

29th day of January 2019


YVONNE STRAIN
Notary Public
NOTARY PUBLIC, State of New York
01ST6314054, Schenectady
Commission Expires November 3, 2022


Christopher Warner

Invoice Work Order # 1903799
Attorney File # RE: 1:19-cv-00639